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Substitute for form 1449/PTO <h1>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</h1> <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	10/559,694-Conf. #3005
				Filing Date	May 1, 2006
				First Named Inventor	Wolfgang Kreisel
				Art Unit	4173
				Examiner Name	C. R. Stone
				Attorney Docket Number	64609(70301)
Sheet	2	of	2		

[illegible]

Examiner Signature	/Christopher Stone/	Date Considered	01/07/2010
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /C.S./